## Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: PROTECTIVE PACKAGE FOR

CUSHIONING OBJECT WITH CIRCULAR

CONTOUR

Attorney Docket Number:: 0579-1091

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 4
Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::
Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: GUY

Middle Name::

Family Name:: SCHOTT

Name Suffix::

City of Residence:: LIGNY EN BARROIS

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 69, RUE DE STRASBOURG

Address::

City of Mailing Address:: LIGNY EN BARROIS

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-55500

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: MARIE-AMELIE

Middle Name::

Family Name:: CLERC

Name Suffix::

City of Residence:: LYON

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing BATIMENT C, 2, RUE LOUIS THEVENET

Address::

City of Mailing Address:: LYON

state of Province of Marring Address::								
	Country of Mailir	ng Address::	FRANCE					
Postal or Zip Code of Mailing Address:: F-69004								
	Correspondence In	nformation						
	Correspondence Customer		00466					
	Number::			•				
	Representative In	nformation						
I	Representative Cu	resentative Customer 00466						
Number::								
	Domestic Priority Information							
	Application::	Continuity	Paren	Parent		Parent	Filing	
		Type::	Appli	plication::		Date::		
	This application	National Stage	of PCT/FR03/03369			11/13/0	03	
	Foreign Priority	Information						
	Country::	Application	Filing Date::		Priority			
		Number::			Claimed::			
	FRANCE	02/14555	11/20/	02	Ye	S		
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## Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::